

INVENTEK

Dov Rosenfeld
5507 College Avenue, Suite 2
Oakland, CA 94618, USA
Phone: (510)547-3378; Fax: (510)291-2985
dov@inventek.com

RECEIVED
CENTRAL FAX CENTER

NOV 22 2004

Fax

Patent Application Ser. No.: 10/712,428

Ref./Docket No: EUR-101

Applicant(s): Joskin, et al.

Examiner.:

Filing Date: November 12, 2003

Art Unit: 2613

FAX COVER PAGE

TO: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

United States Patent and Trademark Office
(Art Unit 2613)

Fax No.: 703-872-9306

DATE: November 22, 2004

FROM: Dov Rosenfeld, Reg. No. 38687

RE: Request for Certified Copy

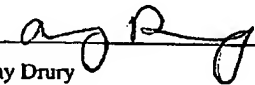
Number of pages including cover: 3.

OFFICIAL COMMUNICATION

Certificate of Facsimile Transmission under 37 CFR 1.8

I hereby certify that this response is being facsimile transmitted to the United States Patent and Trademark Office at telephone number 703-872-9306 addressed the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on.

Date: NOV 22, 2004

Signed: 
Name: Amy Drury

NOV 22 2004

Our Ref./Docket No: EUR-101

Patent

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Joskin, <i>et al.</i>	Group Art Unit: 2613
Application No.: 10/712,428	Examiner:
Filed: November 12, 2003	
Title: METHOD AND APPARATUS FOR RESAMPLING LINE SCAN DATA	

REQUEST FOR CERTIFIED COPY

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir or Madam:

Please mail me at the address below a certified copy (for \$20.00) of the above referenced patent application.

X Please charge any fees to my deposit account No. 50-0292. The Commissioner is hereby authorized to charge payment of any fees associated with this communication or credit any overpayment to Deposit Account No. 50-0292.

Please send a paper copy.

Please call or fax me at the number below if there are any problems or questions.

Respectfully submitted,

Date

Nov. 22, 2004
Dov RosenfeldAttorney/Agent for Applicant(s)
Reg. No. 38687

Address for mailing certified copy (and correspondence address):

Dov Rosenfeld
5507 College Avenue, Suite 2
Oakland, CA 94618
Tel. (510) 547-3378
Fax: (510) 291-2985

NOV 22 2004

Our Ref./Docket No: EUR-101

Patent

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Joskin, <i>et al.</i>	Group Art Unit: 2613
Application No.: 10/712,428	Examiner:
Filed: November 12, 2003	
Title: METHOD AND APPARATUS FOR RESAMPLING LINE SCAN DATA	

REQUEST FOR CERTIFIED COPY

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir or Madam:

Please mail me at the address below a certified copy (for \$20.00) of the above referenced patent application.

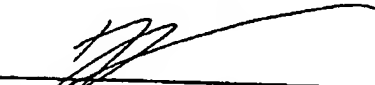
X Please charge any fees to my deposit account No. 50-0292. The Commissioner is hereby authorized to charge payment of any fees associated with this communication or credit any overpayment to Deposit Account No. 50-0292.

Please send a paper copy.

Please call or fax me at the number below if there are any problems or questions.

Respectfully submitted,

Nov. 22, 2004
Date


Dov Rosenfeld
Attorney/Agent for Applicant(s)
Reg. No. 38687

Address for mailing certified copy (and correspondence address):

Dov Rosenfeld
5507 College Avenue, Suite 2
Oakland, CA 94618
Tel. (510) 547-3378
Fax: (510) 291-2985